

ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5952
Name: Amoco Production Company
Address P.O. Box 800, Rm. 1833
City/State/Zip Denver, CO 80201

Purchaser: _____
Operator Contact Person: J. A. Victor
Phone (303) 830-4009

Contractor: Name: Exeter Drilling
License: 3098

Wellsite Geologist: _____

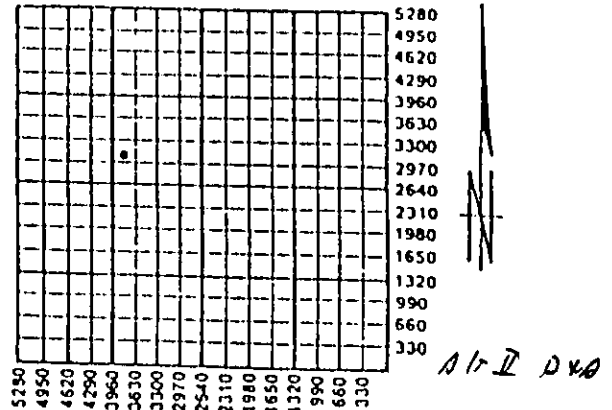
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If OWO: old well info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable
6/14/90 6/22/90 6/23/90
Spud Date Date Reached TD Completion Date

API NO. 15- 071-20515 -0000
County Greeley
SW SE NW Sec. 11 Twp. 18 Rge. 43 East West
3150 Ft. North from Southeast Corner of Section
3890 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Brewer Well # 3
Field Name Moore-Johnson
Producing Formation N/A
Elevation: Ground 3912' KB 3924'
Total Depth 5300' P81D _____



Amount of Surface Pipe Set and Cemented at 532 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cnt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply. Information on side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form. See rule 82-3-107 for confidentiality in excess of 12 months. One copy of all wireline logs and drillers time log shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Ch Burton
Title Sr. Admin. Analyst Date 11/9/90
Subscribed and sworn to before me this 9th day of November, 19 90.
Notary Public Julie A. Victor
Date Commission Expires 4/7/94

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

SIDE TWO

Operator Name Amoco Production Company Lease Name Brewer Well # 3
 Sec. 11 Twp. 18 Rge. 43 East County Greeley
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">Formation Description</th> </tr> <tr> <td></td> <td style="text-align: center;"><input checked="" type="checkbox"/> Log</td> <td style="text-align: center;"><input type="checkbox"/> Sample</td> </tr> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Bottom</th> </tr> <tr> <td>Cedarhills</td> <td style="text-align: center;">2340'</td> <td></td> </tr> <tr> <td>Stone Corral</td> <td style="text-align: center;">2520'</td> <td></td> </tr> <tr> <td>Pennsylvanian</td> <td style="text-align: center;">3530'</td> <td></td> </tr> <tr> <td>Herbner</td> <td style="text-align: center;">4040'</td> <td></td> </tr> <tr> <td>Des Moines</td> <td style="text-align: center;">4500'</td> <td></td> </tr> <tr> <td>Morrow Shale</td> <td style="text-align: center;">5010'</td> <td></td> </tr> <tr> <td>Mississippian</td> <td style="text-align: center;">5165'</td> <td></td> </tr> </table>	Formation Description				<input checked="" type="checkbox"/> Log	<input type="checkbox"/> Sample	Name	Top	Bottom	Cedarhills	2340'		Stone Corral	2520'		Pennsylvanian	3530'		Herbner	4040'		Des Moines	4500'		Morrow Shale	5010'		Mississippian	5165'	
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CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	24#	532'	Lite C	150	CACL 2%
					Premium C	150	CACL 2%
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth
	N/A			N/A			
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First Production	Size	Set At	Packer At				
N/A							
Producing Method							
		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perforation Dually Completed Conmingled Other (Specify) _____

Production Interval _____